



**Department of
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News Release

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VA's Disclosure Policy Lauded in New England Journal of Medicine

WASHINGTON – The Department of Veterans Affairs (VA) policy on disclosure of adverse medical events was praised as a “valuable resource for all health care institutions” in an article in a recent issue of the New England Journal of Medicine.

“At VA we strive every day to deliver superior health care,” said Dr. Robert Petzel, VA’s Under Secretary for Health. “When mistakes occur, we immediately acknowledge them and learn how we can do better in the future.”

Adverse events, such as incomplete cleaning of medical instruments, may affect significant numbers of patients over time. However, prompt disclosure also presents an opportunity to quickly assess risk to patients and to learn how to improve health care delivery and processes.

The article, entitled *The Disclosure Dilemma*, states that although many health care organizations have adopted policies encouraging disclosure of adverse events to individual patients, these policies seldom address large scale adverse events. It adds, however, that VA’s own disclosure policy is “a notable exception.”

The authors, including Denise Dudzinski, Ph.D., an associate professor and Director of Graduate Studies at the Department of Bioethics & Humanities at the University of Washington School of Medicine in Seattle, go on to say that VA’s policy outlines “a clear and systematic process” for disclosure decisions regarding large scale adverse events –a process that can include convening a multidisciplinary advisory board with representation from diverse stakeholder groups and experts, including ethicists. A co-author of the article is VA employee Mary Beth Foglia, RN, Ph.D., of the National Center for Ethics in Health Care and affiliate faculty at the Department of Bioethics and Humanities the University of Washington.

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The VA policy endorses transparency and expresses an obligation to disclose adverse events that cause harm to patients. Its provisions can include the convening of a multidisciplinary advisory board to review large-scale adverse events, recommend whether to disclose and provide guidance on the manner of disclosure.

The authors of the article conclude with the following observation, which summarizes VA's philosophy on the matter: "Disclosure should be the norm, even when the probability of harm is extremely low. Although risks to the institution are associated with disclosure, they are outweighed by the institution's obligation to be transparent and to rectify unanticipated patient harm."

For additional information, contact the VA Office of Public Affairs at 202-461-7600.

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